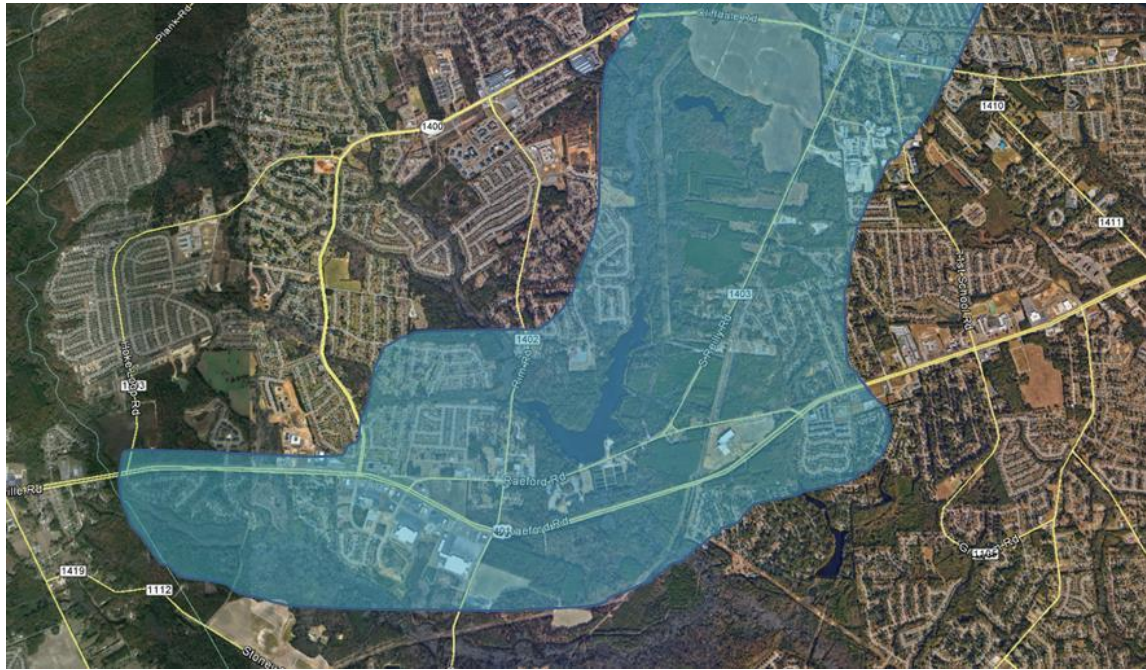


MEDICAL VILLAGE PLAN



DRAFT

City of Fayetteville

The City of Fayetteville is poised to capitalize on one of the most significant economic development opportunities in its history—the creation of a medical village that will become a regional destination as well as an economic catalyst for the City.

ACKNOWLEDGEMENTS

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MEDICAL VILLAGE PLAN

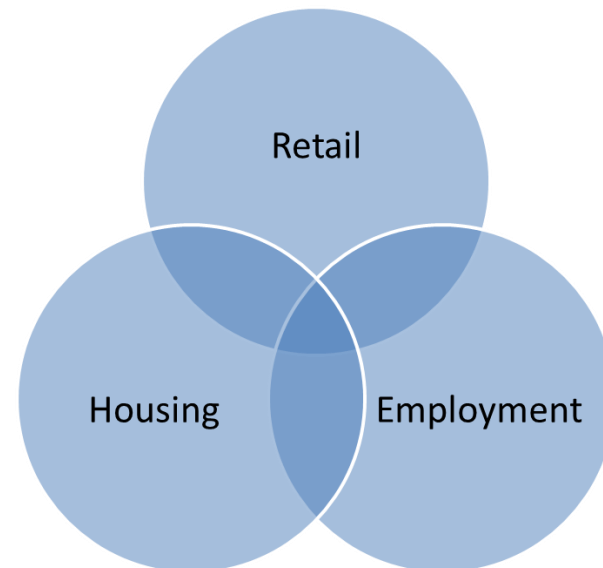
CITY OF FAYETTEVILLE

EXECUTIVE SUMMARY

The City of Fayetteville is poised to capitalize on one of the most significant economic development opportunities in its history – the creation of a medical village that will become a regional destination as well as an economic catalyst for the City. The effort is supported by the fact that, nationally, healthcare is among the most promising industries for job growth and real estate development in the coming decades. Demand for healthcare services, jobs and development is driven by a number of factors, particularly the tremendous growth of Americans over the age of 65 who require the most medical services. The number of Americans aged 65 and over is expected to double between 2010 and 2040. The demographic conditions driving healthcare growth in the rest of the country exist in Fayetteville as well. The private market in Fayetteville is already showing that medical uses are feasible, along with the strong population of veterans and the new VA Health Center, so the questions for the future of Fayetteville revolve around not if something like a medical village will happen, but how and at what scale and quality.

Recognizing these healthcare industry trends and their potential for significant economic benefit for Fayetteville, City leaders established the goal of creating a special district focusing on medical care and a health and wellness lifestyle. The Medical Village Plan supports the City's goal by establishing a master plan for a high quality, mixed-use, pedestrian-friendly district that will complement and enhance the emerging concentration of medical and health care uses in the vicinity of the I295 Outer loop and Raeford Road.

With a vision of community-wide health and wellness, the plan integrates health-consciousness and lifestyle into all aspects of development. It focuses on creating a distinct “place” rather than a random collection of businesses and neighborhoods by providing a mixed-use collaboration of medical, commercial and residential uses; an emphasis on walkability; and high-quality, sustainable development that will provide an uplifting



ECONOMIC BENEFITS

Healthcare, Medical Office, Biotech, Research and Development, Housing, Retail and Public Spaces

experience for employees, patrons, visitors, and residents. Such “places” are suitable and desirable for people of all ages—younger professionals, families with children, empty nesters and seniors.

The mixture of uses, facilities and activities that may be offered in the village will provide a health-centered “lifestyle” environment with activity during the days, evenings, and weekends that help energize, populate and animate the district. The mixed-use village centers are essential to such a thriving urban environment in the medical village. Located adjacent to the VA Health Care Center and future FTCC West Campus, and in close proximity to residential neighborhoods, the village centers will be filled with shops, restaurants, and “third places” such as coffee shops, cafes and unique shops, that provide interactive community meeting places and a pedestrian-engaging environment. The village centers will also include a mixture of offices, hotels and a dense, urban-style residential component.

A key component of the plan is the wide array of medical and supporting services and activities concentrated in the medical district. The density of services and adjacency to the village centers, residential neighborhoods and open spaces will encourage walkability. Medical-related uses include hospitals, medical offices, laboratories, pharmacies, rehabilitation assisted living centers, hotels and education.

Siting of the buildings within the medical village will frame the streetscape, capitalize on the amenities, encourage pedestrian movement, make efficient use of the land and create a density that can support local transit service. Housing options will offer variety for people of different age groups with varying needs, including lofts, live-work units, townhouses and single-family homes.

Preservation and enhancement of the existing parks, open spaces and natural areas is key in attracting residents and businesses to the village and improving the overall quality of the area.

The plan for the medical village defines a design philosophy and implementation strategy for attracting high quality healthcare, housing and services into a setting and lifestyle concept unique to Fayetteville. If successfully implemented, the medical village will stimulate new development opportunities, create jobs, expand the City’s tax base and create inviting, engaging, connective experiences for residents, visitors and patrons. Implementation of such a plan will have many components – physical, financial, regulatory, operational and organizational – and will necessitate flexibility as market conditions change over time.

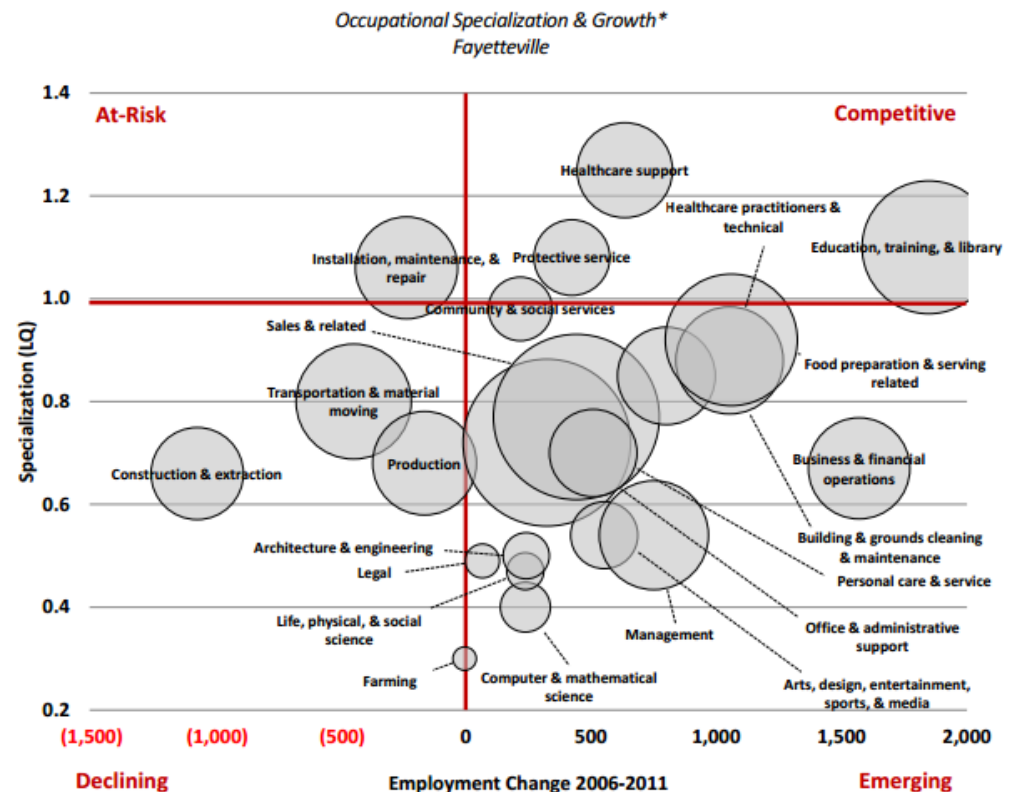


Credit: CLH Design

Healthcare is identified in the City's Comprehensive Plan as an emerging sector anticipated to play an increasingly significant role in the future economic growth and success of the City of Fayetteville. The Garner Report for Fayetteville and Cumberland County makes note that the largest absolute occupational gains have come from the Military Group. Healthcare was one of three other occupational groups that experienced growth in the same time period, and has measures of local specialization. Recognizing the developing concentration of medical uses in the vicinity of the I295 Outer loop and Raeford Road, the City identified the area as a primary gateway with a special focus on linking current and future medical facilities into a cohesive, mixed-used, walkable district. The purpose of the Medical Village Plan is to support the City's goal of designating a special area that will establish identity, promote continuity, and invite significant new investment to fulfill the demand for medical and healthcare related uses.

The focus area of the plan encompasses a contiguous area of land generally located around the intersection of the future I295 Outer loop and Raeford Road. The plan will evaluate the market feasibility of such a district, establish a framework and guidelines for the development of improvements, and recommend implementation strategies for the village. Implementation of the plan should stimulate new development opportunities and create experiences for citizens and visitors beyond what is now possible.

The plan reflects input from the citizens of Fayetteville, the U.S. Department of Veterans Affairs, Fayetteville Technical Community College, Fayetteville Metropolitan Planning Organization, City of Fayetteville Planning Commission, City staff and City Council members. It will be used by City staff, decision-makers, village business owners and property owners in the creation of a mixed-use area that focuses on medical care, health and wellness by creating a distinct “place” rather than typical strip commercialization and a random collection of



*Military not shown. See table below.
Size of the bubble represents total employment.
Source: Economic Modeling Specialist, Garner Economics

neighborhoods.

This plan cannot anticipate or detail every feature that will ultimately make up the medical village; however, it does define the design philosophy underlying the village enhancements, and illustrates real world examples of its application to help facilitate and translate the different components of a medical village into a distinct identity. To be successful, the plan must focus on defining a distinct image for the village, populating the district with pedestrians, providing green spaces for exercise and relaxation through the preservation of valuable environmental features, and stimulating economic growth by providing an atmosphere for attracting businesses.

A VISION FOR THE FUTURE

The vision for the area is one of mutual compatibility and support among differing uses with people living and working in the community. The community also envisions a neighborhood with a perception of safety that encourages people to live and work within the area and promote development that is consistent with, and transitions to, the established neighborhood scale. A walkable, multi-modal community with a variety of transportation options enhances connections and safe pedestrian and bicycle routes and crossings is envisioned to achieve the following:

- Support the expansion and growth of medical facilities and associated businesses
- Recognize, foster and enhance the interdependency and compatibility of the healthcare, residential and retail uses in the area
- Support and accommodate growth and redevelopment
- Support development of medical village as a mixed-use community integrated into the surrounding area

GUIDING PRINCIPLES

The plan for the Medical Village is based on a series of guiding principles. These principles shape the plan, and provide a solid foundation on which to base planning decisions. They act as a compass to guide new projects



and policies, as well as a measure against which to evaluate the appropriateness of future development proposals and designs. They are intended to provide decision-makers with common direction; facilitate understanding of the plan and inspire and nurture basic planning attitudes that will enable future City leaders, staff, developers and consultants to bring the vision of the medical village plan to fruition.

Create a Distinctive Destination

The City benefits from distinct districts and neighborhoods that provide citizens and visitors with diversity, variety and choice. The medical district provides an opportunity to establish a special and unique community within the City, the region and the state. It can become an identifiable magnet for medical facilities, distinguished professionals, health and wellness services and activities. These activities will be heightened by a living, working, shopping, dining and recreational environment.

Create a Mixed-Use District

The medical district should include a mixture of medical, wellness, and recreational activities and facilities, as well as retail, personal service, residential and office land uses. This will provide a “life- style” environment with activity during days, evenings and weekends that help energize and animate the district. Retail space should be focused on the village centers and include windows and entries directly from the sidewalk. These spaces can be populated with stores, restaurants and “third places” such as coffee shops, Internet cafes and bookstores that will provide an engaging community meeting place and pedestrian environment.

A diversity of housing types should also be encouraged in order to fill a variety of needs and markets, such as:

- Lofts.
- Live-work units.
- Townhomes.
- Single-family lot homes.

Integrate “Health-Consciousness” into all Development

Provide many ways to access and circulate within the medical district, with an emphasis on convenient, shaded pedestrian and bike connections, which encourage exercise and a healthy life style.

- Trails should connect to parks, open space and other areas of the district. Certain areas should include exercise stations.
- Provide shade for walking, parking and other hard surfaces in order to lower ambient temperature and make outdoor activity more



comfortable.

- Employ LEED and “green building” techniques to reduce energy consumption and improve air quality.
- Utilize storm-water management techniques that create amenities and assist in recharging ground water.
- Provide transit, such as a local trolley or shuttle that would connect medical facilities with professional offices and retail/restaurant areas to minimize the need for driving and to facilitate handicapped access.

Design Complete Streets

Complete streets are those that comfortably accommodate multiple users, such as transit, cars, pedestrians and bicycles, and are designed to function as both vehicular ways and civic space.

When local streets are designed for traffic to move between 20 and 25 mph, all users can share the street. Drivers move slowly enough to watch for pedestrians and see signs and signals. Pedestrians feel safe crossing the roadway; and cyclists can blend in with vehicular movement. Medical district patrons could happily “park once” and enjoy walking to multiple destinations.

Other street improvements that help achieve this goal include:

- Bulb-outs at pedestrian crossings.
- Minimal turn radii at corners.
- Special paving at pedestrian crosswalks.
- On-street parking and street trees.
- Street furniture, such as pedestrian level lighting, seating and trash bins.
- Pedestrian-oriented signage.

Design Engaging Street Walls

New and redeveloped buildings in the medical district should generally be placed at the sidewalk to give streets and blocks a comfortable “outdoor room” feeling. Continuity of windows and doors should create a permeable relationship between the buildings and the sidewalk, creating a flow between inside and outside. A consistent “visual texture” for the street wall, created by complementary



arrangements of floor lines, window and doors openings, and other features, is more important to a cohesive image than a consistent architectural period or style.

Design Parking to Support Urban Design Goals

Parking should be maximized on non-arterial streets to provide easy customer access to businesses and to aid in traffic calming. Additional parking should be placed in the center of blocks and lined with buildings.

Build Upon Authenticity

Respect and build upon historic and cultural precedents and traditions in site design and architecture. Solid, enduring materials should be used. Buildings should be articulated in a way that establishes a rhythm of bays, and windows should be “punched” and have shadow lines rather than be flush with the building wall surface. Recruit locally owned businesses when possible.

Design for Visual Richness

Great streets have “a thousand points of detail,” including diverse and detailed architectural facades, engaging signage, attractive furnishings, colorful plantings, sidewalk commerce and public art. The City’s regulatory framework should be flexible enough to allow the unfolding of a diverse and stimulus-rich environment over time.

Design for Sustainability

New projects should reflect best practices for “green” urban design strategies and building techniques, “light imprint” site design and greener transportation. Design for new buildings and the public realm must respond to local climate extremes, especially in the provision of shade to enhance walkability and reduce ambient temperature.

Capitalize on Value Creation

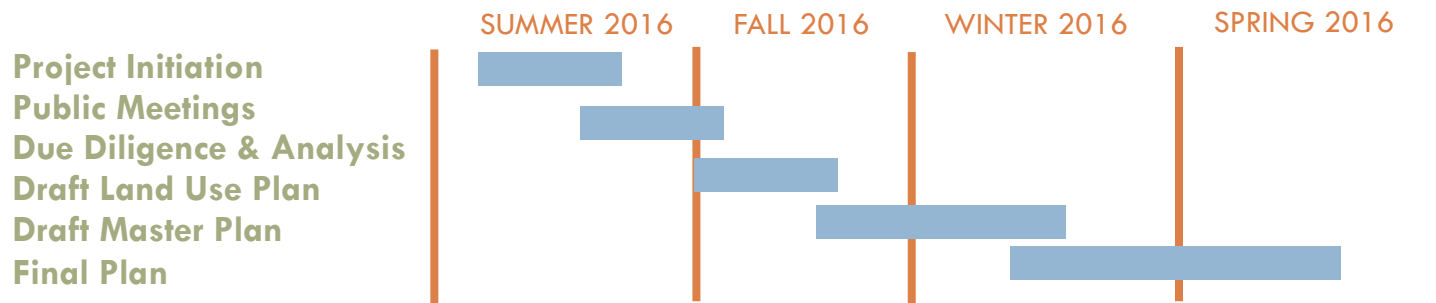
There are proven techniques to capture value in developments. These should be utilized throughout in order to ensure ongoing reinvestment in the district.

- Proximity and access to public open space, including buildings that directly face the public amenity.
- Easy and convenient access (walking, biking, transit and auto) to retail, restaurant and recreational uses.



PLANNING PROCESS

The development of the Medical Village plan began with the initiation of the Comprehensive Plan update and a desire from Council to address current and future development in emerging and redeveloping areas of the City. The first such area plan, The Cape Fear River Plan, was adopted in May of 2016. Project initiation of the Medical Village started in the late summer of 2016 with due diligence and analysis of the study area. From there, a kickoff meeting was held in October at the Lake Rim Recreation Center to gather information and provide early concepts. A follow-up meeting was held at the beginning of December to report back initial findings based on community feedback, existing conditions, density, opportunities and a draft land use map.



During the inventory and analysis phase of the process, an extensive site reconnaissance was conducted by city staff, documenting the existing conditions and key observations in and around the study area. In addition, existing planning and engineering reports related to land use, parks and trails, transportation and infrastructure were reviewed during the development of the plan.

After analyzing the various forms of data collected, preliminary concepts were prepared and presented for review and discussion. Based on input from stakeholders and City staff, a refined concept was presented, which ultimately led to the development of the plan.

Stakeholder Interviews

The stakeholder interviews were another important part of the planning process. The small group format and confidential nature of the stakeholder interviews often provides critical information to the project team that may not be revealed in a public meeting or large group setting. Comments

MEDICAL VILLAGE PLAN

made during the interviews are not attributed to individuals in order to respect participant privacy and encourage candor. The stakeholder interviews allow the project team to make sure that stakeholder aspirations, concerns and knowledge of the project area were heard by staff and integrated into the master plan. While staff reviewed extensive information and documents about the medical district and the City of Fayetteville, these documents can never be a substitute for small group conversations or local knowledge about the area and its history.

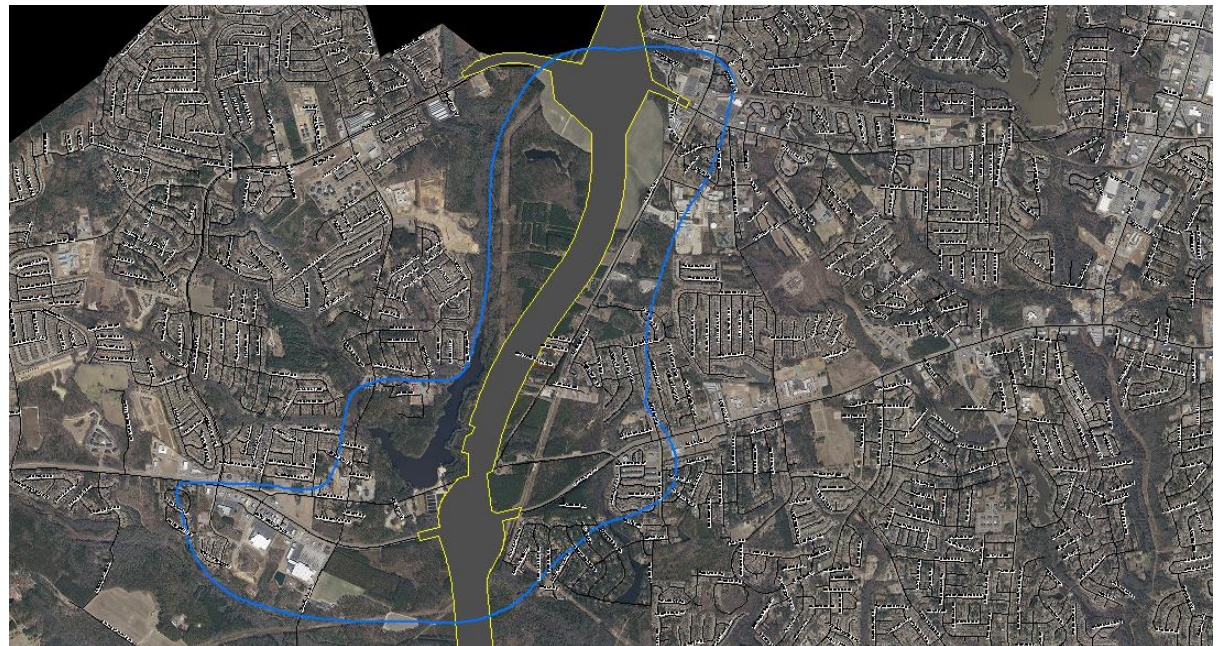
Further, stakeholders often continue to be involved in the master planning process throughout its duration and later in implementing the plan. Therefore, it is critical that their perspectives be documented and considered early and addressed in the final plan.

SITE ANALYSIS

The site analysis is a process of data collection and study that enables staff to experience the study area through the eyes of the users and stakeholders, assess opportunities and constraints, and develop a plan with recommendations for implementation. As part of the site analysis process, staff conducted an extensive site reconnaissance, documenting the existing conditions, opportunities and constraints in and around the study area. The study area was analyzed from the viewpoint of a vehicular passenger and a pedestrian as each viewpoint is critical to the development of a successful plan. In addition, existing planning and reports related to land use, parks, transportation and infrastructure were reviewed during the development of the plan.

Project Area

The target area of the study encompasses a total area of over 15,000 acres and more than 17,000 parcels, where the target area is 3,400 acres of land generally located around the intersection of the future I295 Outer loop and Raeford Road extending to the east and west with a focus on the S. Reilly corridor.



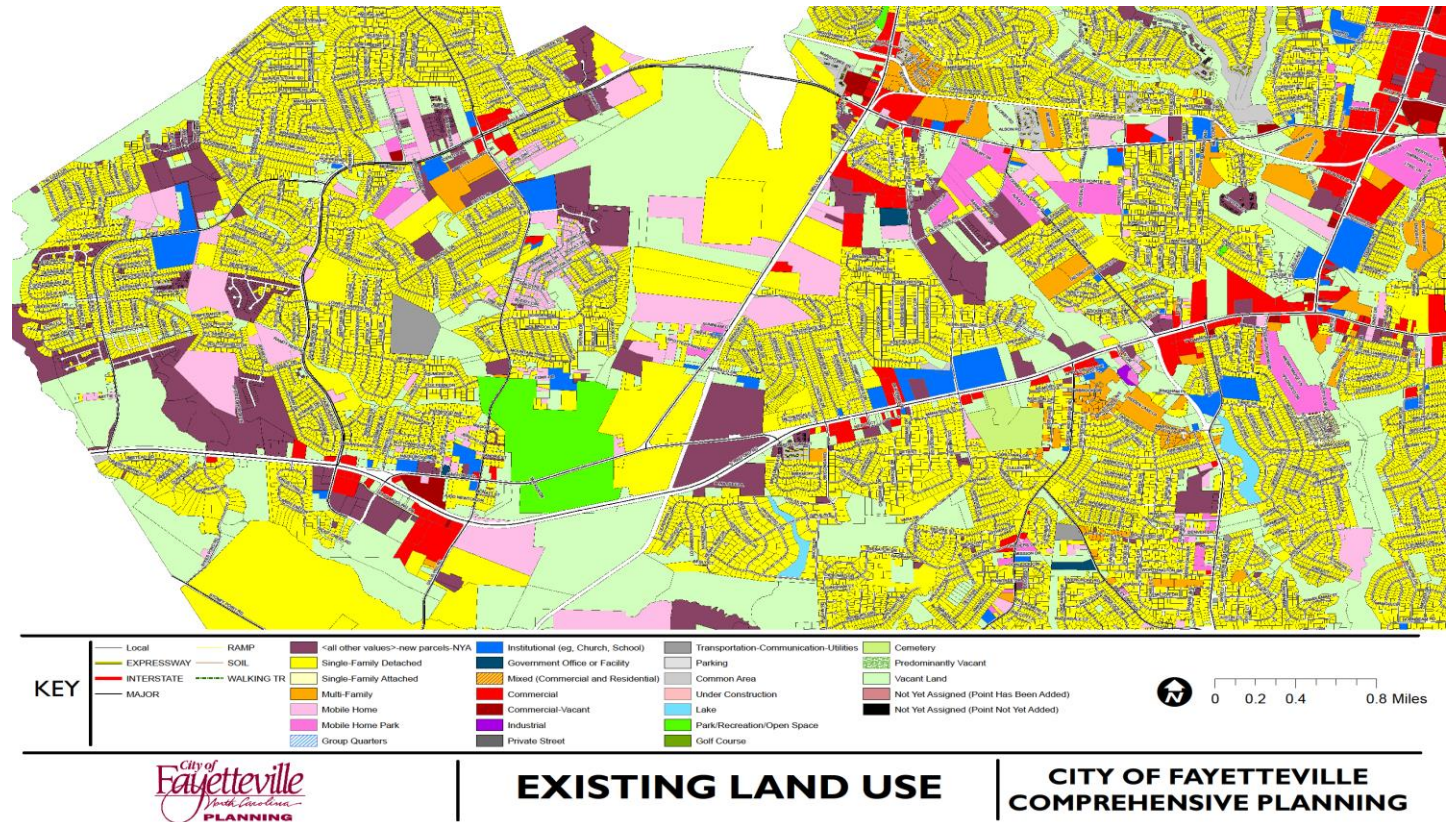
Existing Land Use

According to the City's 2010 Land Use Plan, the existing land uses in the project area generally include industrial, commercial, large lot residential, public and semi-public uses. A large portion of the study area is currently unimproved or vacant within the medical village study area, and potentially available for future development. This appears to be the largest concentration of available land in the City limits.

On the west side of Raeford Road, existing development includes a heavy dose of retail, office and commercial from Gillis Hill Road to Cliffdale Road with a mixture of medium to low

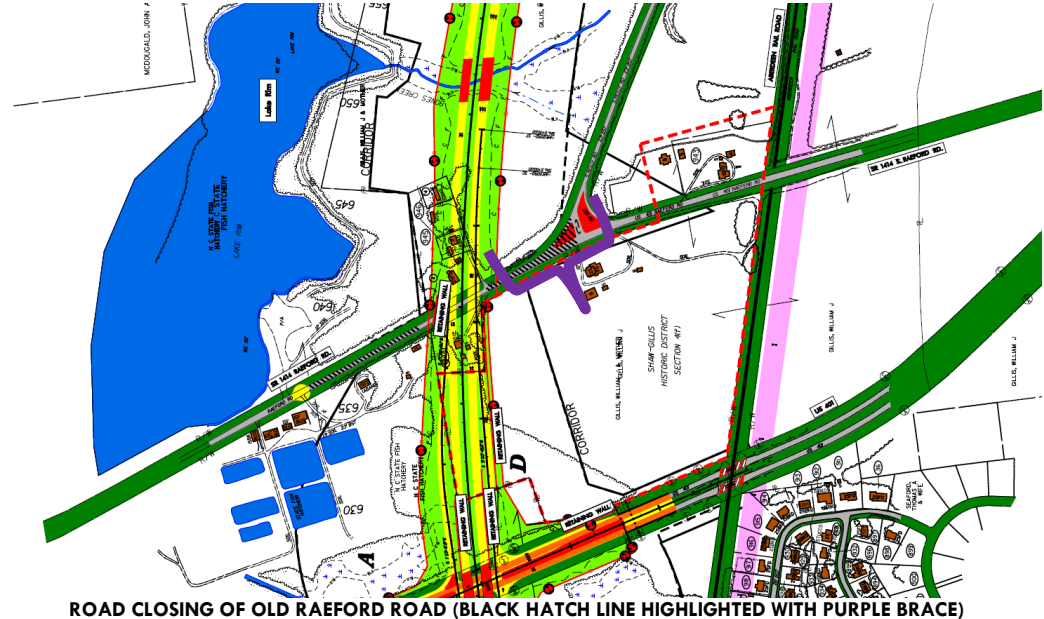
density residential surround the commercial node. Most of the medical facilities in the area are in the major commercial area or the east of the VA Health Care Center between Old Raeford Road and 71st School Road. With the completion of the Outer loop that will overpass Raeford Road with on and off ramps these areas will essentially be separated from each other. There are significant scattered large vacant tracts of land along Raeford Road that are available for future development.

The area surrounding the VA Health Center should stimulate additional growth and development that will connect the existing commercial node stretching from Cliffdale Road to Gillis Hill Road with existing development towards Strickland Bridge Road. It is imagined that a concentration of supporting uses to the VA and future FTCC campus could create a significant mixed-use center bordered by Lake Rim Park, Rim Road, S. Reilly and Raeford Roads.



Parks, Open Space and Natural Areas

Within the study area, there are parks, open space and natural areas that are valuable for their beauty and vulnerable to development impacts, including Lake Rim and its tributaries and drainage ways, floodplain land and City parkland,. When fully completed, the Lake Rim Regional Park will connect the medical village to Lake Rim, with more than 230 acres of open space. As part of the development of the Outer loop, Old Raeford Road will be closed to traffic for those that travel southbound on S. Reilly Road and travel west on Old Raeford to eventually reconnect with Raeford Road. This will hinder vehicular access to the park and create a significant detour for those wishing to access the facility. Preservation, enhancement and restoration of these areas will promote the vision of wellness within the village, while improving the overall beauty and visual quality of the village as well.



LAND USE/ZONING

Issues and Opportunities

Healthcare is a vital and important part of the district and the City. There is a need to provide appropriate zoning to accommodate continued growth within a cohesive healthcare district in a manner that promotes the health, welfare and livability of the surrounding residential community. The growing desirability and popularity of the district has increased the demand for all types of development. There is a desire to balance the needs of businesses and residents to create an active and successful mixed-use community. Current zoning does not always support the existing land uses defined in the 2010 Plan. Requests for rezoning should support the vision and goals for the district.

Current Zoning Goals

- Support rezoning that achieves a mixed-use community in keeping with the vision of this Plan. Provide a mix of uses and greater density in the focus area.
- Retain single family homes as part of a mix of diverse housing types.
- Allow for expansion and changing models of healthcare.

- Development should be reviewed to ensure impacts on users adjacent to the hospitals are effectively minimized.
- Promote rezoning if a site is no longer suitable for its current use.
- Preserve the intent of the open space and land use transitions between hospital uses and adjacent residential neighborhoods created by the series of existing hospital zone districts in any future updates to the district.

MOBILITY

Issues and Opportunities

Auto traffic into and through the district is a major concern. A multi-modal approach to transportation which supports transit, bicycles and pedestrians, is the best way to accommodate increased travel. Increasing transit opportunities is the most effective way to reduce traffic and parking demands. Cross-city traffic on arterial streets within the district produces speeds and traffic volumes that make pedestrian and bicycle mobility difficult. Pedestrian safety is a major concern along pedestrian routes, and transit stops. Continued improvement is still needed to accommodate cross-town, hospital and residential traffic and parking. Increased public transit may reduce the need for additional parking as well as reduce growth in traffic volumes.

Goals

- Develop multi-modal access to and through the district.
- Establish direct, pedestrian friendly circulation and crossing patterns that connect uses with transit stops and bicycle and pedestrian routes. Provide pedestrian friendly crossings.
- Develop traffic calming strategies within the residential neighborhoods and where necessary to support these goals.
- Enhance pedestrian and bicycle connections to parks and recreational facilities.
- Establish clearly defined circulation routes into and through the proposed development that promote safety and do not negatively impact residential neighborhoods.
- Support uniform and collaborative parking strategies for all healthcare institutions.

HOUSING

Issues and Opportunities

The community values its diversity and seeks to retain the broad mix of housing types and prices currently found within the district. They fear that rising property values and redevelopment will limit opportunity for lower and moderate income families. However, they also see growth and redevelopment as an opportunity to strengthen the community.

Relatively few healthcare workers currently live within the community. This plan promotes the attraction of healthcare workers to the neighborhood by creating a mixed-use community where people live, work, shop and recreate.

Goals

- Support the growth, stability and diversity of the residential communities by ensuring a continued mix of housing types and prices, racial and economic diversity.
- Retain and promote affordable housing.
- Protect the historic housing stock as a value to the neighborhood.

ECONOMIC ACTIVITY

Issues and Opportunities

The VA Health Care Center is an important economic anchor and community asset providing a diverse employment base critical to the overall stability and continued growth of the community. Ensuring the continued vitality of healthcare uses within the district is a key component of this plan.

The community recognizes the businesses and healthcare services as part of the energy of the community and seeks to foster a strong connection between those who live and work in the district.

Currently, there is a lack of connection between the healthcare uses, local business and residences whereby workers live, shop and/or recreate in the community. Residents of the neighborhoods do not take advantage of employment opportunities within the neighborhoods. Healthcare employees tend

*Average Hourly Occupational
Earnings Comparison
2011*

Major Occupational Groups	Fayetteville	US
Healthcare practitioners & technical	\$33.17	\$33.65
Military	\$31.69	\$23.30
Computer & mathematical science	\$29.17	\$34.41
Architecture & engineering	\$27.59	\$34.11
Life, physical, & social science	\$26.27	\$29.11
Business & financial operations	\$24.95	\$27.09
Management	\$23.95	\$30.53
Legal	\$23.34	\$40.83
Education, training, & library	\$21.32	\$27.79
Protective service	\$17.51	\$19.55
Installation, maintenance, & repair	\$17.03	\$19.78
Construction & extraction	\$16.37	\$20.79
Arts, design, entertainment, sports, & media	\$16.06	\$17.94
Community & social services	\$15.84	\$17.84
Office & administrative support	\$13.76	\$15.72
Farming	\$13.50	\$11.38
Transportation & material moving	\$13.47	\$16.07
Production	\$12.94	\$16.06
Sales & related	\$12.02	\$16.19
Healthcare support	\$11.54	\$12.95
Personal care & service	\$9.47	\$11.52
Food preparation & serving related	\$9.31	\$10.22
Building & grounds cleaning & maintenance	\$9.16	\$10.64

Source: Economic Modeling Specialist, Garner Economics

not to shop in the area and do not take advantage of local businesses and services.

Increased residential growth and density creates new demands for existing shops and services. There is concern that the growth could out-pace the available services. The community sees an opportunity for economic growth to support the increase in population while reinforcing the established commercial corridors.

Goals

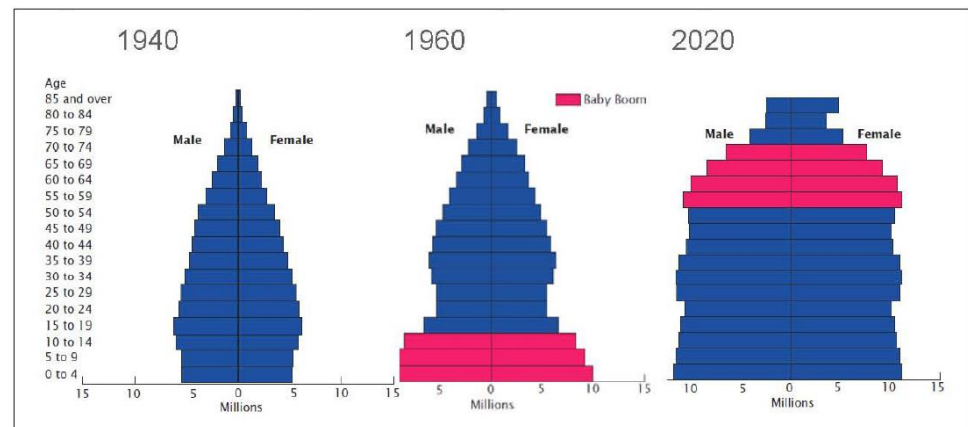
- Maintain hospitals as an economic anchor for the community and the city and support the future growth of healthcare and healthcare related businesses. Encourage the hospitals to provide primary services to the community and the city in addition to their role as regional Healthcare centers.
- Encourage commercial growth to support the increased residential density by balancing the needs of established businesses with the creation of new ones.
- Support the established commercial corridors. Create opportunities that encourage medical employees to support neighborhood businesses.
- Encourage mixed-use development rather than single use businesses areas that are empty at night.

HEALTHCARE TRENDS AND DEMOGRAPHICS

Healthcare Drivers

Both in Fayetteville and nationwide, healthcare is a large, strong and growing industry – in sharp contrast to most other sectors for the nation's economy. The fundamental drivers of this growth are:

- The growing number of Americans who are over 65 years of age
- General population growth
- Affluent demographic groups around the globe that will travel if necessary to seek out the best healthcare and wellness facilities
- National policy has expanded the number of citizens covered by insurance
- Strong continues growth potential for biosciences, pharmaceutical, medical devices and related industries

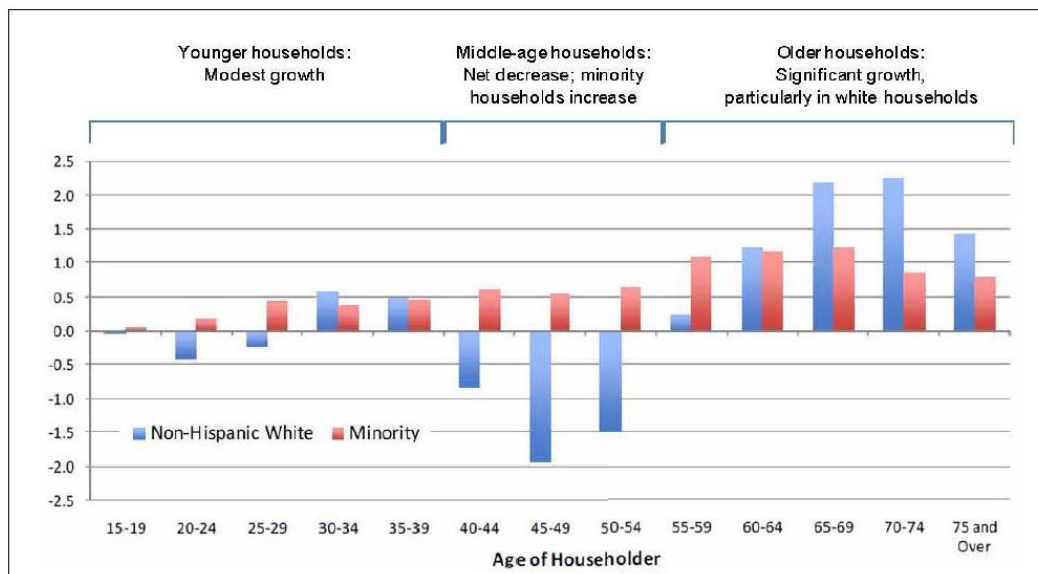


America's Population
Source: US Bureau of Census

- The growing awareness of the need and benefits for health and wellness programs

The Graying of America

Throughout their lives, as America's largest generation, baby boomers have made headlines. This continues today, as economists, demographers and forecasters attempt to discern the impacts that aging baby boomers will have on America in the 21st Century. The impact will be broad and will include impacts to the workplace, public policy, retail and other facets of life. The figure to the right shows the dramatically changing shape of America's population over the past half-century. Between 2010 and 2040, the US Census projects that that number of Americans over the age of 65 will double – from approximately 40 million today, to 80 million in 2040. Beginning in January 2017, and over the next 13 years, at least 10,000 baby boomers per day will turn 65.



The figure to the left underscores the scale of the growth in older households nationwide, while also illustrating some additional elements of the nation's changing demographics. This data also foreshadows a growing need for smaller dwelling units with a richer variety. As references above, the greatest amount of overall household growth during the coming decade will come from the baby boomer generation. Younger households, with heads of households younger than 40 years of age, will also grow – through at a lesser pace. In particular, households ages 25 to 34 – a key demographic that drives apartment demand and development – will experience strong growth. The number of middle-age households, however, will decrease, because of the relatively small number of “Generation X” (born between the early mid-1960s and the early 1980s) households compared to baby boomers. The decrease in this age group – which has the

largest percentage of families and children- suggests that the single-family housing market will continue to stagnate for some time. However, there will be a growth in the number of minority-headed middle-age households.

More than Healthcare – Lifestyle

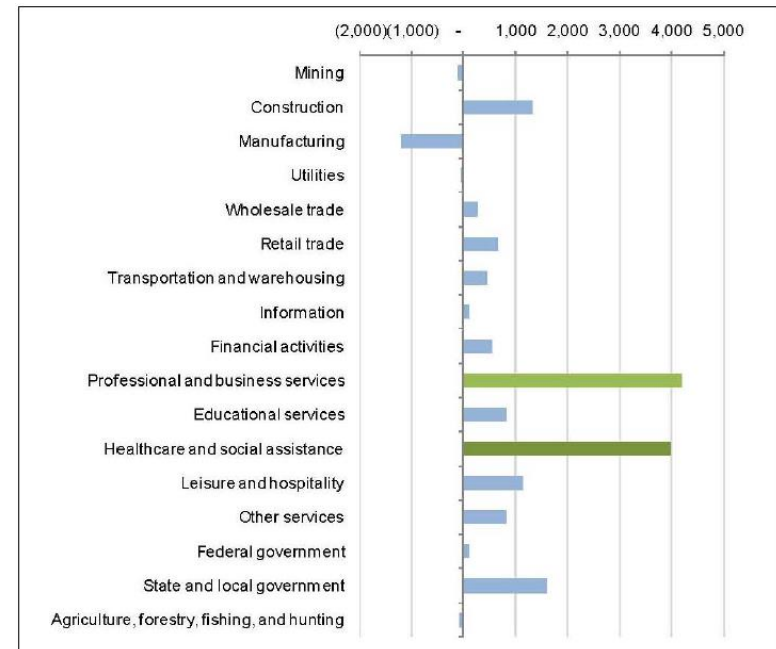
Baby boomers are unlikely to want to register at a retirement community and live out the rest of their days apart from the outside world. They will be seeking more from their communities than simply reliable healthcare. According to a survey, the following are some of the key features that baby boomers will look for in their future housing choices and communities (Source: “Who are you calling a senior?” Urban Land Magazine)

- Working will continue to be an important part of the boomer lifestyle. Fifty-five percent of boomers plan to continue to work at least part-time, making urban areas close to job opportunities and transportation more desirable. Urban workforces are better plugged into the new economy, a trend that only stands to strengthen as the U.S. information economy expands.
- Arts and culture. Boomers overwhelmingly seek locations that offer travel, arts, hobbies, fitness, entertainment, dining, culture, shopping and gardening—raising the question; what are boomers not interested in? Surprisingly, they agree on their lack of interest in golf, tennis or a move to a warmer climate.
- Of the boomers who are anticipating a move, only 20 percent are very interested in golf and/or warm locales, and plan to include those factors as part of their moving decision.
- Eighty-six percent of baby boomers want to live in a typical community setting where people of all ages live; diversity of age and experience is critical to boomers.

Information suggests that our definition of “senior housing” will change. Rather than seclusion and exclusivity, many boomers will want activity and connection – with their children, grandchildren, friends and communities. Along with outdoor pursuits, seniors will be looking for arts, culture, food, continuing education and lifelong learning and other pastimes. Further, while high quality healthcare is very important to senior citizens, they are looking for communities in which it is part of an overall puzzle, not the entire picture.

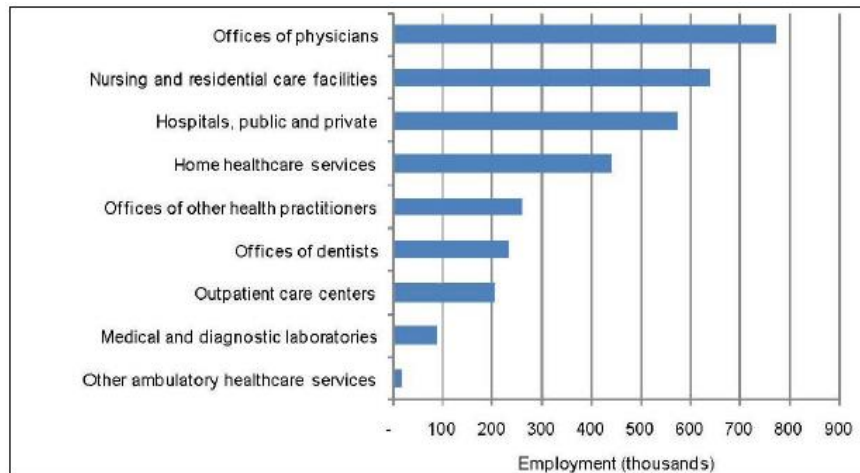
Increase in Health Related Jobs

Job growth in the United States has stagnated over the past several years. In the coming decades, job growth is expected to come from several well-defined industry segments, led overwhelmingly by healthcare and professional services. The Bureau of Labor Services (BLS) predicts that the healthcare industry will generate 3.2 million new jobs in a 10 year period. Therefore, there is an opportunity to accelerate the development of a medical village or cluster of institutions as a major economic development opportunity, since this industry is expected to be among the fastest growing in the country.

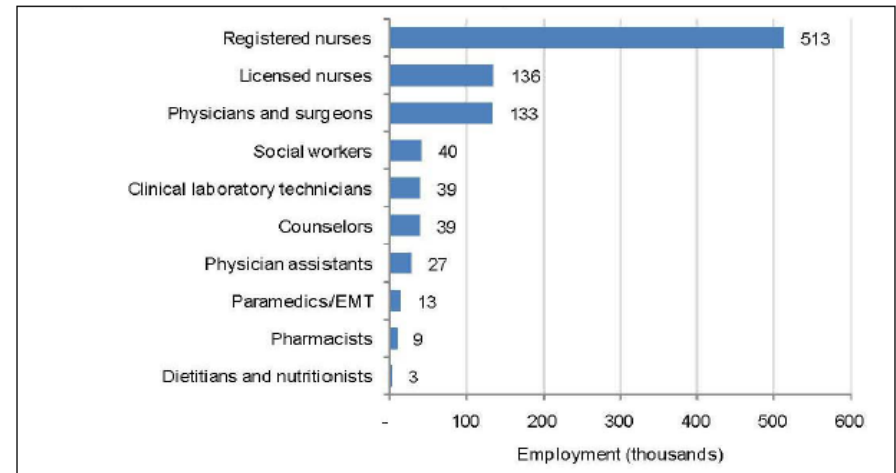


National Employment Growth by Industry
Source: Bureau of Labor Services

MEDICAL VILLAGE PLAN



Net New Employment by Facility Type
Source: BLS Guide to Healthcare Industry

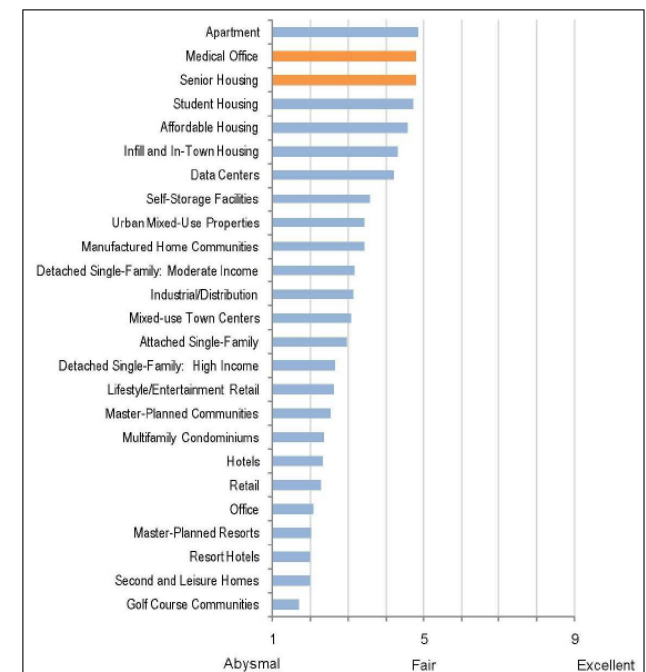


Net New Employment by Facility Type
Source: BLS Guide to Healthcare Industry

Figures above show both the types and locations (by development type) of jobs expected to be created nationally in the healthcare fields. This information is relevant because it is indicative of the types of development likely to take place, and because it shows the breadth of jobs that could be created within the City and region. The greatest demand will be for those trained as nurses, physicians and surgeons, followed by many other professionals including social workers, lab technicians and physician assistants. These job types in general offer relatively high wages and security compared with national averages.

Real Estate Development Outlook

Real estate development was a major source of the national recession, and an industry that continues to suffer in its aftermath. Nationwide, most types of real estate development continue to be out-of-favor with investors due to dramatic overbuilding in the early part of the last decade, increased unemployment and stagnating wages, more caution on the part of consumers, increased scrutiny by lending managers, ratings agencies, and regulators and other related factors. These conditions are reflected in real estate development prospects figure,



Real Estate Development Prospects
Source: Urban Land Institute

which show some of the key findings from the Urban Land Institute's (ULI) Emerging Trends in Real Estate, a leading annual real estate industry publication.

While industry leaders are extremely pessimistic about most types of development – most development types are seen as nearly “abysmal” – development within several land uses is “fair”, that is, financeable and profitable under the right conditions. These include apartments, medical offices, senior housing and other types of affordable and infill housing. All of these are development types with strong long-term demand drivers that did not suffer from the same scale of dramatic overbuilding as single-family housing and other types did in the early 2000s.

While these trends are important for the medical village, there are a number of qualifications to this information that should be recognized. The Emerging Trends analysis is nationwide and intended for the short term. In fact, we know that every real estate market is highly localized, with its own demand drivers (economy, demographics, etc.) and players (existing development, developers, property owners, etc.). Many North Carolina cities and metropolitan areas have continued to create jobs and enjoy strong real estate markets through much of the last several years, thus avoiding the worst of the national real estate downturn. In addition, the medical village is intended to be a long-term vision with a long-term build-out, and thus, the trends in effect in 2030 and beyond will be nearly as important as those for next year.

However, with these caveats in mind, the land uses anticipated to be strong opportunities should continue to maintain their top positions for much of the coming decade. Nationally, the medical office sector has outperformed most other commercial property types through the recession.

MEDICAL DISTRICTS AND URBAN DEVELOPMENT

Major healthcare institutions and related uses have clustered together in medical districts across the country. These villages are a result of deliberate and assertive action by healthcare providers, the public sector, and other stakeholders, who seek to provide their patients with more complete offerings for care, proximity to other experts, suppliers and complimentary uses, and increased economic outcomes such as growth in jobs and tax bases. The following case studies summarize some of the key characteristics of medical corridors and districts nationwide.

Research of medical districts across the nation indicates successful medical districts tend to be located in larger communities with populations in excess of 500,000. However, one well established and notable example is Winston-Salem, NC. With a population of nearly 230,000, Winston-Salem is comparable to and only slightly larger than Fayetteville as one of the top 5 of largest municipalities in North Carolina.

COMMON TRAITS FOR HIGHLY SUCCESSFUL DOWNTOWNS AND VIBRANT URBAN DISTRICTS

No single organizational model exists. While Fayetteville can and should learn from other medical district models, the approach adopted in Fayetteville will ultimately be distinctive to Fayetteville.

Great urban districts are beloved by their citizenry. Pride in the medical village must be promoted and instilled internally to the residents. The village could be useful in establishing a distinct gathering place for meetings focused on medical issues and for patients and their friends and families in the course of access to comprehensive health care solutions.

MEDICAL VILLAGE PLAN

Great downtowns and urban districts are able to overcome obstacles. This requires partnerships, shared resources, vision and patience. The premise of the medical district itself is the product of a shared vision and shared resources. The lesson needs to be extended throughout the district and the community. In the context of current and predicted economic reality, there is no viable alternative to a robust public-private partnership to get things done.

Great villages are walkable and have pedestrian scale. There must be interesting features that capture the attention of pedestrians while assuring personal safety. The variety of patrons and residents of medical village institutions will help to attract a variety of businesses, public art, aesthetically pleasing streetscapes and visual diversity.

Great urban districts have a commitment to mixed-use development. Developers and investors are urged to build for and attract a range of occupants, business types and institutional services. Virtually by definition, the medical village will itself be a form of a mixed-use development, so this theme can be applied more broadly, too.

There is broad public/private investment in the future of downtowns and urban districts. Partnerships are essential for the private, public and non-profit realms. The medical village can and must demonstrate that public/private investments can achieve significant results, and should include a variety of private interests (developers, etc.), public leadership and non-profits.

Entertainment is the driving market segment. Revitalized downtowns increasingly serve as places for dining and recreation rather than simply centers for retail merchandise. The medical village can be a leader in attracting and sponsoring public events (fairs, concerts, art walks, “healthy foods” farmers market, etc.) that instill interest in the medical village, eventually leading to a wide range of investments.

There are typically a number of strong, adjacent residential neighborhoods that are within walking distance of an urban village. Respecting the existing neighborhoods while also establishing new residential neighborhoods is essential for the success of the area. Access to and from housing in the neighborhoods must be redesigned to encourage pedestrians into the medical village.

Housing is either existing or underway. The medical village must have a substantial amount of housing in addition to improvements in transportation and pedestrian routes. Such housing should appeal to the workforce in the medical village as well as seniors, include affordable options, and be developed as walkable neighborhoods.

Colleges and Universities help, but are not the sole answer. Many of the medical villages studied are in university towns, but the research found that universities are not automatic keys to district vitality. However, research indicates that a strategic partnership with institutions of higher education is vital to medical villages, is an attraction for regional visitors and a source of well-trained labor for the entire area.

With these metrics in mind, a strategic model for establishment of a medical village in Fayetteville and the broader community that leverages the characteristic of its existing strengths can be designed. Such a model, however, must be unique to Fayetteville and must be supported by those who use or would use the medical village more actively.

Successful medical corridors and districts have been established in a wide spectrum of urban areas. Some summaries of case studies of Medical Villages are provided on the following pages.



**Wake Forest Baptist Medical Center
Winston-Salem, NC**

- Largest employer in Forsyth County
- 14,440 employees
- 198 buildings
- 428 acres
- Wake Forest Baptist Health
- Wake Forest School of Medicine
- Wake Forest Innovations



**VA Health Center
Fayetteville, NC**

- 1,700 employees
- 1,000 patient visits daily
- 250,000+ square feet
- Relocates outpatient health care services from VA Medical Center and Village Green and Breezewood Primary Care Clinics
- 66,000 + Veterans receive care at Fayetteville VA and its Community-based clinics with 45,000+ receiving care in Fayetteville
- Primary Care, Day Surgery, Imaging Services, Medical and Surgical Specialties



**Vidant Medical Center
Greenville, NC**

- Largest employer in Greenville, NC
- 7,868 full time workers
- 1,439 beds
- Serves 1.4 million in 29 Counties
- East Carolina University School of Medicine
- Robotic heart surgery training center
-



Source: Texas Medical District

Texas Medical Center Houston, Texas

- World's largest medical center.
- 93,500 employees.
- 1000 acres.
- 14 hospitals and two specialized patient facilities.
- 160,000 daily visitors.
- 69,000 students, 5,000 of whom are international students.
- 5.6 million annual patient visits.
- 50-year Master Plan completed in 2006.
- \$7.1 billion in building and infrastructure investments approved between 2010-2014.
- Annual Economic Impact – \$14 billion.
- Annual Research Expenditures \$1.2 billion.



Source: City of Dallas

Stemmons Corridor Southwest Medical District Study Area Dallas, Texas

- Plan adopted 2010 (to be implemented through 2013).
- TIF district.
- 100,000 employees.
- 5,000 businesses.
- Biotechnology and medical services – key targeted industries.
- Key healthcare providers and tenants:
 - UT Southwestern Medical Center.
 - Parkland Health & Hospital System.
 - Children's Medical Center.
 - Texas Woman's University School of Nursing.
- 40 Hotels (Stemmons Corridor).
- Planned expansion of clinical care and new research buildings.
- Planned 350,000 SF biotech and life science research park.



Source: Urban Land Institute Special Report: Office/Medical Development, 2008

Texas Research Park - San Antonio, Texas

- UT - Institute for Biotechnology.
- UT - Institute for Longevity and Aging.
- Biomanufacturing firms.
- TEKSA Innovations Corporation.



Source: 10th Street Medical Business District Development Strategy, 2006

10th Street Medical Business District Oklahoma City, Oklahoma

- Recommended Development Program, 2006 to 2020:
 - Office: 450,000 to 800,000 SF.
 - Retail: 130,000 to 175,000 SF, groceries, restaurants, bars, drug stores, household goods, gas stations, apparel, day care, bars.
 - Mid-size hotel: 200-250 rooms.
 - Residential: 1,500 to 2,000 units (average of 1,200 SF per unit).



Source: health.usnews.com

Five Points Medical District Birmingham, Alabama

Key healthcare providers:

- University of Alabama Hospital – 908 beds.
- HealthSouth Medical Center – 73 beds.
- HealthSouth Lakeshore – 100 beds.
- Callahan Eye Foundation Hospital – 20 beds.
- Children's Hospital Of Alabama – 310 beds.
- Cooper Green Mercy Hosp – 141 beds.
- Veterans Affairs Medical Center – 122 beds.
- St. Vincent's Hospital – 372 beds.
- Brookwood Medical Center – 602 beds.
- Princeton Baptist Medical Center – 368.
- Birmingham Baptist Medical Center – 375 beds.
- Select Specialty Hospital – 38 beds.
- Hill Crest Behavioral – 80 beds.



Source: health.usnews.com

Sugarland, Texas Key healthcare providers

Key healthcare providers:

- Memorial Herman Sugar Land Hospital – 77 beds.
- Triumph Hospital Southwest – 170 beds.
- Sugar Land Surgical Hospital – 6 beds.
- Methodist Sugar Land Hospital – 127 beds.

LAND USE PLAN

Land Use Plan Mixed-Use District and Neighborhood

The medical village will be a fully functioning mixed-use district and neighborhood with its emphasis on pedestrians, bicycles, transit, and cars. It will be suitable, and in fact very desirable, for people of all ages – young professionals, families with children, empty nesters and seniors. This type of neighborhood meets the demands of the highest growth demographic market over the next 40 years. It also happens to embody the timeless principles of successful neighborhoods. A key feature of the land use plan is the establishment of mixed-use village centers.

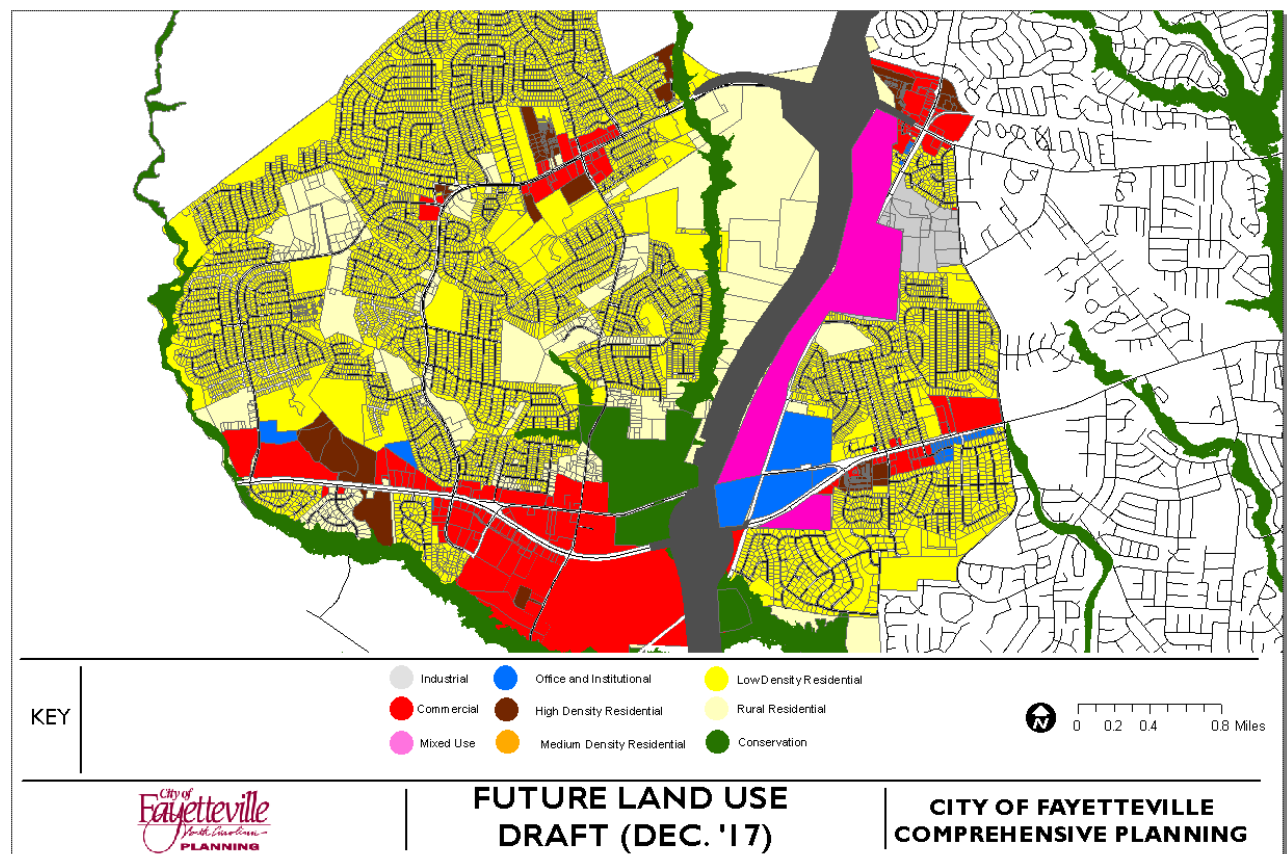
District Expansion

It is anticipated that the medical village may grow over time as properties within and surrounding the area develop. Appropriate land uses for these areas will need to be determined at the time of development and should be based on the guiding principles in the plan, existing surrounding uses, availability of infrastructure, and the marketability of the proposed land uses.

Flexible Growth

The key to achieving the goal of flexibility in development is to establish the framework of roadways, trails and open space; and to establish core land use areas, such as:

- VA Health Care Center
- FTCC West Campus
- Raeford/Gillis Hill/Rim Commercial Node
- Repurposing of South Reilly Road
- Existing and planned residential areas
- Possible additional specialized medical facilities



Land Use Categories

The Land Use diagram indicates several land uses, some of them unique to this plan:



Medical-Related: A pedestrian-friendly area intended to provide a concentration of medical-related uses, including labs, professional offices, pharmacies and others that will provide a full range of support uses for medical activities.

Uses include: All medical services, rehabilitation, sports medicine, psychiatric, laboratories, pharmacies, senior housing, assisted living, hotels and education



Village Centers: Intended to provide a mixture of retail and residential uses, possibly with supporting offices in a pedestrian and bicycle-friendly environment.

Uses include: Retail, office, urban residential, restaurants, medical-related and hotels.



Commercial: Intended to provide more professional office space and services, primarily targeted for sites along the major corridors

Uses include: Professional office, retail, personal service, medical related, hotels and other similar uses.

Suburban Commercial: Intended to provide low intensity professional office space and services, primarily targeted for sites along the secondary corridors.

Uses include: Professional office, retail, personal service, medical related and other similar uses.



Urban Residential: This is a neighborhood adjacent to medical-related facilities and the village center which is fairly high density and very pedestrian and bicycle-friendly. It should contain a variety of residential types and sizes.

Uses include: Townhome, live-work, loft, apartment, independent living, and assisted living.



Low-Density Residential: This is an area of low-density single-family lots that will provide a buffer and transition to existing single-family neighborhoods.

Uses include: Minimum 6,000 square foot single-family lot, cottages, and patio homes.

DEVELOPMENT PROGRAM

A development program is a narrative description of how a property or area should be developed. The program serves as a guide for the physical planners (land planners, landscape architects, architects and engineers) who are responsible for translating the narrative program into a physical development pattern. The development program describes an overall identity for the project including theme, image and “brand” attributes to be merchandised. The overall objective is to capture target markets, maintain economically viable conditions, and create a positive, long-term identity for the project.

Product and amenity opportunities are based on the research and analysis of markets for the project—all of which should be simultaneously pursued for the purpose of accelerating project sales and mitigating absorption risk. Programming includes identifying and formulating alternative concepts for the master plan, including:

- Development theme and character.
- Timing and phasing. This development program is intended for an approximately 10- to 20-year period. However, some uses will develop before others.
- Land uses by type, including a wide range of medical and non-medical components.
- Land use mix.



- Number, type and land (acreage) needs of the various land uses.
- Likely amounts of medical and commercial uses (measured in square feet) and housing (measured in dwelling units).
- Recommended amenities.

Making accurate long-term development projections has never been easy. But it is arguably more difficult now than ever before, given the dramatic changes to the nation's economy and real estate markets that have taken place, and the ripple effect this has had on consumer preferences and demand for housing, retail space and other components of the built landscape.

Successful Programs are Market Driven

The master plan must address, to the extent possible, the goals of the City. The additional and equally rigorous layer of considerations that impact the program consists of:

- Market willingness to seek out medical services, housing, shopping or leisure activities, or other products and experiences in the physical environment to be developed.
- Market capacity to pay either through equity, debt service, rents, home ownership or commercial rents.
- Lending and loan underwriting policy and criteria.
- Achieving reasonable levels of profitability commensurate with risk to attract private development capital to the study area.
- Establishing an arrangement of land uses which can be successfully introduced in the marketplace with sufficient velocity (rate of sales) to generate revenues adequate to cover or partially cover the cost of infrastructure both on-site and off-site.

Hence, all development strategies must thoughtfully consider the needs of the potential employers, residents, and shoppers who will come to the district. These considerations include price, size, quality levels, image, quality of life and other factors.

Development Identity and Character

Preparing a development program for the medical district begins with establishing a statement of the recommended overall identity and character for the project. This statement of the project should be adopted by the medical district leadership and organization. It is analogous to the mission statement in a business plan. It is the guiding statement against which later program details can be “tested” for compliance in support of the overall theme. The recommended program is for a medical district and mixed-use community, as illustrated in the following graphic.



A Special Place and Destination

The medical district will of course have a different look, feel, and identity than the rest of Fayetteville, but it should establish a sense of place and, in doing so, create a means by which it can differentiate itself from its competition. This will help it to attract patients, doctors and residents because of a natural desire to spend time in high-quality environments.

Great Neighborhoods

Two key groups—senior citizens and medical professionals—will have a distinct interest in living close to the medical district. Seniors have a demonstrated propensity for living in close proximity to quality medical care, and people tend to seek housing that is within easy access to their jobs. This suggests strong demand within the medical district for both senior housing—which includes a “continuum of care” that ranges from independent living, to assisted living, to skilled nursing facilities—and a wide range of housing for medical professionals. The types of housing sought by medical professionals will also be very broad, and may range from large-lot, single-family homes, to urban-style condominiums within walking distance of the hospitals. Making these housing options available will enhance the value proposition of the medical district and its potential for long-term success. The medical facilities will benefit from a consistent base of patients, and find it easier to attract the best doctors, nurses and technicians if great neighborhoods are located nearby. Finally, this population will also help the village center retail component to thrive.

Medical and Supporting Uses

As shown in the figure to the right, the medical village can generally be divided into major use areas: an existing and expanding medical core and a large are of supporting uses. However, these areas will include a mix of medical and non-medical uses. The types and locations of these uses are summarized on the following pages.

Medical and Healthcare Uses	Supporting Uses Located in the Medical District	Supporting Uses Located in the Surrounding Areas
<ul style="list-style-type: none"> Existing Hospitals and expansions Medical Office Buildings Specialty Clinics Research and Development University/Educational Facilities 	<ul style="list-style-type: none"> Retail/Village Center General Office Hotel and conference space Plazas, pathways, parks, and other public spaces 	<ul style="list-style-type: none"> Senior Housing <ul style="list-style-type: none"> Independent Living Assisted Living Skilled Nursing Facility Single-Family Detached and Attached Housing Neighborhood Retail



Retail / Village Center

A village center with a strong retail component could thrive within the medical district. Retail provides activity and amenities to the residents, employees and visitors of the medical district. Retail is the “theater” that will entertain visitors and create a sense of place, making the medical district more desirable for residents, visitors and employees of the area.

Requirements for Success:

- **Visibility.** Thousands of customers must pass and see the site on a daily basis. Daily traffic volumes of approximately 20,000 are desirable for most national retailers. SH 6 running through the medical district has daily traffic counts of 60,000 at the intersection of Rock Prairie Road.
- **Accessibility.** Must be very easy to get to; daily-shopping or convenience retail should be on the “way home” (right) side of the street.
- **Central location vis-a-vis target markets.** For example, grocery anchored centers should be within approximately one mile of 10,000 residents.

- **Manageable competitive environment.** Most retailers will avoid an area if competitors are already located there.
- **Demographic match.** Retailers choose sites located near their “target market” customers.
- **Anchor tenants.** Retail developments are often “anchored” by one tenant (for example, a high-profile department store) who then attracts other tenants.
- **Sense of place, safety, cleanliness.**
- **Contiguity.** Urban retail must be continuous, or many shoppers will stop and turn back.
- **Parking capacity.**



Hotel

Experience from other medical corridors shows that additional hotels and conference space will be needed in this medical district to accommodate visiting families, patients, and doctors.

Requirements for Success:

- **Visitor amenities and attractions.**
- **Easy access to major thoroughfares.**
- **Co-location with other hotels.**
- **Visibility.**
- **Parking capacity.**



Office

Office uses would be an excellent addition to the medical district as they would provide daytime activity to the area and are compatible with the other uses being proposed for the area.

Requirements for Success:

- **Easy access to and from clients.**
- **Accessibility to workforce and executive residences;** offices tend to be sited near the center of metro regions or at major transportation hubs.
- **“Address status.”**
- **Proximity to suppliers and collaborator firms.**
- **Parking capacity.**
- **Proximity to support services:** banking, food, hotels and other services.
- **Access to intra- and inter-regional transportation connections** such as freeways, high capacity transit and airports.



Medical Office Building

Medical office buildings (MOBs) typically include routine and preventative care facilities such as physician's offices, dentists, ophthalmologists and various other providers. MOBs have many of the same locational requirements as typical office buildings such as easy access for clients; proximity to support services such as food, hotels, labs and medical suppliers; ample parking; and access to intra- and inter-regional transportation connections such as freeways, high capacity transit and airports. However, MOBs usually require a higher degree of technology and services, such as advanced computer systems, greater number of plumbing fixtures, and a higher standard of air quality and purification than typical office buildings.



Specialty Healthcare

Specialty healthcare includes specialists in cardiology, oncology, OBGYN, mental health and other fields that cannot be completely addressed within a single general-care hospital. These specialty services can be offered in multi-tenant or single-tenant clinics, or on a contract basis within the existing hospitals. In addition, medical hardware suppliers and other support facilities are likely to locate in the medical district in the future.



Research and Development

Research and Development (R&D) facilities can be comparable to office buildings, flexible warehouses, or industrial properties depending upon the type of research being conducted. Often they need both types of facilities: an office in which to develop and market concepts and a lab or production room to conduct experiments and fabricate prototypes. Like MOBs they require a greater level of technology and often have higher energy and water consumption. They also require a greater level of security, as products may be in a highly secretive phase of development. R&D facilities benefit from proximity to universities and large research hospitals for prospective employees as ideas spin off from research conducted at these institutions.

Supporting Uses: Senior Housing

Stakeholder interviews and research indicate strong recognition of the need for more senior housing and Long Term Care (LTC) facilities in Fayetteville. The facilities listed below show the typical range of senior housing, all of which are appropriate in varying quantities for the medical district. In addition to the categories shown below, continuing care facilities offer the full range of these senior housing types within a single large development. This allows residents to “age in place” and move easily from one housing type to another as their medical needs or preferences change. Continuing care facilities typically require a long-term contract from residents with an initial down payment, whereas the stand-alone facilities are often contracted on a monthly basis. Senior housing differs from other housing types in that it is not only a real estate investment, but also involves a hospitality and health care component that must be considered when operating the facility.

The following sections evaluate the amount of senior housing likely to be in demand within the medical district. Demand for senior housing will come from two primary sources: latent demand and the net new senior population moving to the area.



Independent Living

Multi-unit complex marketed to seniors. Rent premium of approximately 10 percent (above other equivalent multifamily units) for communal dining, housekeeping and transportation services.



Assisted Living

Support services include laundry, food service, arranged activities, limited medical oversight and assistance to those with physical impediments such as blindness or decreased mobility.



Skilled Nursing

Facilities designed to provide 24-hour care and intensive medical attention. Staff assists residents with daily tasks such as bathing, dressing and other needs.

Latent Demand

Interviews with Fayetteville residents and those in the healthcare industry strongly indicate that while there are thousands of senior residents of the city and surrounding areas, there is very little senior housing within the City itself. Many seniors reported having to move out of the City in order to find a senior community that met their expectations. Thus, there is expected to be latent demand for senior housing in the market.

Supporting Uses: Single-Family and Multifamily Housing

As previously stated, the housing market in Fayetteville and other locales in the state have changed significantly over the past several years. In

contrast to the middle of the last decade, the best-selling houses are smaller (1,500 to 1,800 square feet) and considerably less expensive (\$150,000 to \$300,000 maximum). The core of the short-term housing market is seen as those seeking affordable homes and downsizing retirees who have moved out of large homes and are now looking for comparatively smaller and lower-maintenance homes, including “cluster” or “cottage” communities. Both trends are well suited for the medical district.

Requirements for Success

- Critical mass: adjacent residential neighborhoods and urban amenities (schools, parks, retail, and services).
- Safety.
- Large share of one and two person households within market area.
- Easy access to employment centers.



Single-Family Housing
5 to 10 du/acre, 1 to 2 stories
Surface parking



Mixed Use Mid-Rise
40 to 60 du/acre, 4 to 6 stories
Structured parking



Wood Frame Condos or Apartments
20 to 35 du/acre, 2 to 3 stories
Surface, garage or tuck under parking



Town Houses or Row Houses
15 to 25 du/acre, 2 to 3 stories
Surface parking or parking within each unit



Cluster or Cottage Housing
10 to 25 du/acre, 1 to 2 stories
Surface parking

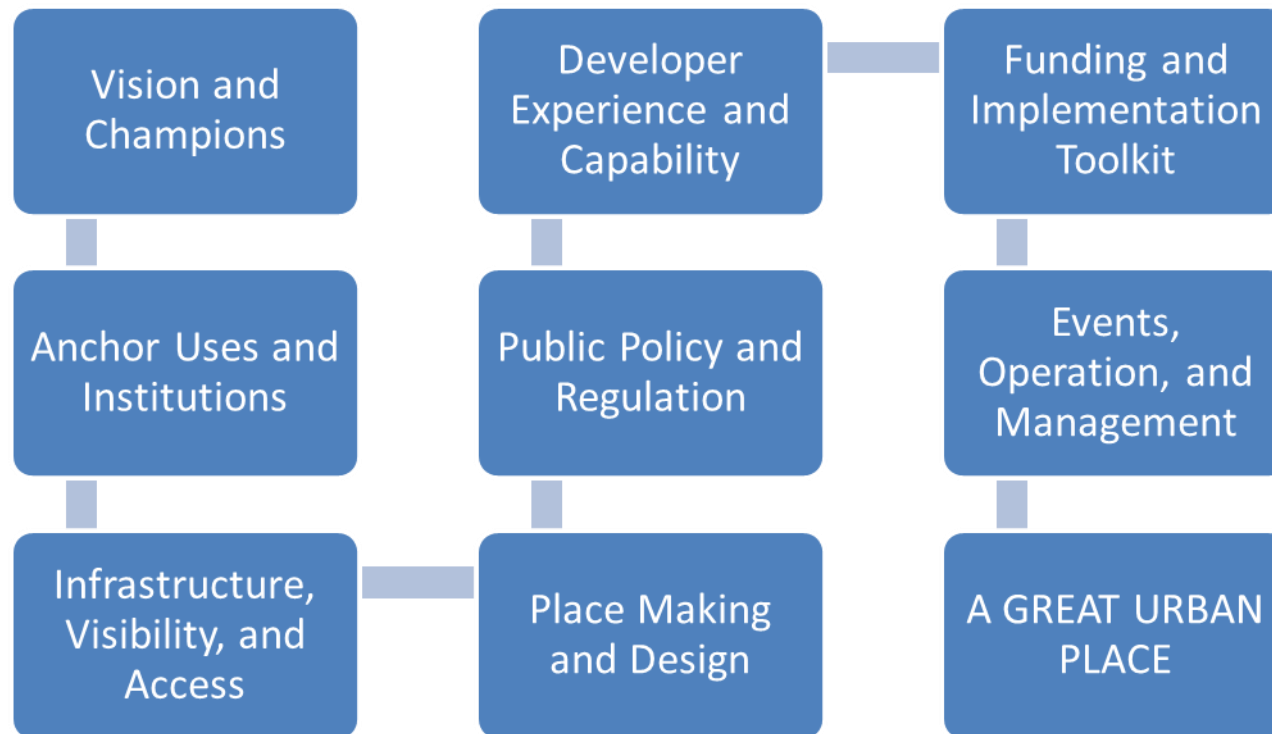
IMPLEMENTATION OF THE PLAN

The vision of the future in the Medical Village Area Plan is only the first part of a successful plan. Identifying ways to achieve that vision is of critical importance. The Implementation Plan contains specific actions necessary to reach the vision. Actions in the implementation plan are short, medium, or long-term and work together to achieve the overall vision for the area.

This chapter recommends a series of principles and tools intended to help the City of Fayetteville and its partners to implement the plan.

Just like the planning process, the implementation of the plan will have many components, including physical, financial, regulatory, operational and organizational. A wide range of actions is required to transform a paper plan into a vibrant built place. This chapter primarily focuses on financial or funding tools, while also making recommendations regarding other elements of implementation.

In order to recommend the proper set of tools for the plan, it is important to recognize the content of the plan— what it is that will be implemented.



Land Use and Zoning

Support the continued growth and viability of healthcare within the district

Promote Medical Village zoning that:

- Provides clarity and predictability for future healthcare development.
- Ensures that appropriate transitions between the Medical Village districts and adjacent residential districts are respected.
- Reviews the potential for zoning to address issues of scale and transitions to preserve space for bulk and open space standards.
- Establishes screening criteria for loading and service areas.

Support rezonings that allow for a mixed-use community with people living, working and recreating within the community.

Ensure zoning conforms to updated land use plan.

- Rezone areas as necessary to provide conformity to the proposed land use map and the recommendations of the Medical Village Plan.
- Evaluate rezoning applications to ensure the anticipated use supports the vision and goals of the plan.
- Consider regulatory changes within areas of stability to protect the scale and character of predominately single family areas and historic properties.

Next Steps	Implementation Partners
Incorporate proposed changes and revise the ordinance where necessary	Healthcare Providers and Planning and Code Enforcement Services
Revise land use plan to conform with recommendations of this plan	Planning and Code Enforcement Services
Protect historic character and seek protection status for properties that provide for design protection	Fayetteville Historic Resources Commission, Planning and Code Enforcement Services

Mobility

Support plans for a multi-modal community that provides transit options and safe connections into and within the district.

- Develop strategies that balance the local and regional transit demands including:
 - Cross-town traffic, destination traffic to the healthcare providers and area business and residential traffic.
 - Enhance the existing transit system to serve the needs of those working or visiting the healthcare uses and providing access to other areas of the city for those who live within the area.
 - Provide direct, pedestrian friendly connections between bus stops and healthcare providers,
 - Evaluate the impact of traffic signal timing and adjust signal timing where appropriate to enhance pedestrian safety.
 - Examine the potential need for increasing transit demand through employer subsidized transit use.
- Support local and limited bus routes with connections to multimodal transit stations.
- Support the creation of new bus routes to serve the district and/or connect the district to regional transit.
- Consider the creation of a circulator through the healthcare district and an integrated parking system shared between uses.

Develop circulation patterns for the healthcare uses that do not adversely impact the surrounding residential communities.

- Redefine and expand circulation routes to the healthcare uses that do not impact the surrounding residential neighborhoods through continue study.
- Support efforts to encourage more people to use transit options.
- Emphasize existing arterial and collector streets to direct traffic to the healthcare providers.

Support pedestrian and bicycle mobility

- Develop enhanced pedestrian and bicycle routes to and from transit stops.
- Provide pedestrian friendly connections between the healthcare providers, local businesses and the residential neighborhoods.
- Enhance existing and plan streets to create a pedestrian friendly corridor.
- Develop an east west pedestrian corridor into and through the healthcare uses.
- Develop safe pedestrian links between the district and supporting uses.

Support measures that protect the residential character of the surrounding neighborhoods and reduce the adverse impacts of increased traffic.

- Study and implement roadway design features that are intended to reduce speed and discourage through traffic from using local neighborhood streets.
- Limit on-street parking in the residential neighborhoods to discourage healthcare workers or visitors from parking in the neighborhoods. .

Next Steps	Implementation Partners
Work with the Fayetteville Area System of Transit (FAST) to determine transit needs within the community	Healthcare Providers and Local Employers, FAST
Develop funding sources for a study that addresses the interconnectivity of transit and traffic on the safety and livability within the district	Healthcare Providers and Neighborhood Associations
Adopt new enhanced pedestrian corridors in the study area, through the healthcare campuses and to future mixed-use centers	Public Works, Healthcare Providers, Neighborhood Associations
Coordinate signalized intersections with transit stops to establish safe and direct pedestrian circulation from transit to healthcare and major employment within the district	Public Works, FAST, Healthcare Providers
Develop joint strategies for addressing share healthcare issues including increased traffic, directional signage and parking	Healthcare Providers, Local Employers

Housing

Provide a variety of housing types and prices to support a diverse community

- Take advantage of existing programs to repair and maintain the existing single-family housing stock.
- Work with Community Development to explore options to support the viability of the existing single family housing stock.
- Support new development that includes single and two family residences in addition to multi-family housing.
- Support new housing that can accommodate a wide range of prices.

MEDICAL VILLAGE PLAN

Develop strategies to encourage people to live and work within the community

- Develop community liaisons to work with the local businesses to provide information about housing and living within the surrounding community.
- Develop an informational packet about living within the community to be given to new healthcare employees.
- Create housing fairs and/or house walks and other mechanisms to showcase the community.

Next Steps	Implementation Partners
Publicize programs that allow homeowners to repair and maintain existing single-family homes	Neighborhood Associations, Community Development
Support rezonings for new development that provide a wide range of housing types and prices	Planning and Code Enforcement Services, Community Development, Neighborhood Associations

Economic Activity

Maintain healthcare as an economic anchor for the community and the city and support the future growth of medical related uses.

- Support opportunities for the expansion of the hospitals and related uses.
- In addition to the VA Health Care Center's role as regional specialty centers, encourage supporting uses to create a community hospital providing primary care services to the community.

Develop strategies to support local businesses and encourage their use by those employed within the district.

- Work with the healthcare providers to ensure their employees know about local businesses.
- Support the creation of new businesses to support increased growth in residential development

Broaden the employment base within the community beyond healthcare and retail.

- Support a broad range of business uses within the community, especially in the existing and proposed commercial nodes. Work with economic development organizations to develop strategies to meet this goal.

Next Steps	Implementation Partners
Develop an association for local merchants to coordinate with healthcare employers to promote and expand services to healthcare employees	Local Merchants, Healthcare Providers
Develop strategies to attract non-healthcare employment to the community	Economic and Business Development